

\*711IHSSF1100\*



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Site Name CONTEMPORARY ART MUSEUM

DocumentType Notification Form (NF)

RptSegment 1

DocDate 1/26/2009

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Box SF1100

AccessLevel PUBLIC

Division WASTE MANAGEMENT

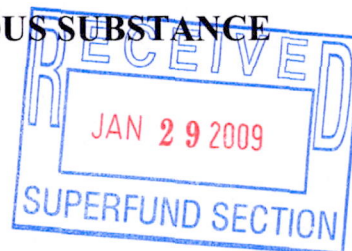
Section SUPERFUND

Program IHS (IHS)

DocCat FACILITY



## NOTIFICATION OF AN INACTIVE HAZARDOUS SUBSTANCE OR WASTE DISPOSAL SITE



Please read instructions before completing and type or print in black ink.

I. SITE NAME AND LOCATION:

Site Name (one site per form) CONTEMPORARY ART MUSEUM  
Location (street address) 409 W. MARTIN STREET  
City RALEIGH US EPA ID# (if known) \_\_\_\_\_  
County WAKE  
Directions to Site  
FROM DENR OFFICE, PROCEED SOUTH TO INTERSECTION WITH  
HILLSBOROUGH STREET. PROCEED EAST ON HILLSBOROUGH STREET TO  
INTERSECTION WITH WEST STREET. TURN RIGHT (SOUTH) ON WEST STREET.  
PROCEED TWO BLOCKS AND TURN EAST ON WEST MARTIN STREET.  
SITE ON RIGHT AT CORNER.

Attach a USGS topographic map or map of equal or reasonably similar scale (1 inch = 2000 ft.) showing the location and vicinity of the site or facility. Label map with the site name.

II. PERSON COMPLETING FORM:

Name MARK BROWN  
Mailing Address 9001 GLENWOOD AVE  
City RALEIGH State NC Zip Code 27617  
Telephone (919) 861-9905 SWC  
9410

Present Owner \_\_\_\_\_  
Past Owner \_\_\_\_\_  
Present Operator \_\_\_\_\_  
Past Operator \_\_\_\_\_  
Other ☒ ENVIRO.  
(specify) CONSULTANT

III. PRESENT OWNER:

Individual Owner or Company Name  
CONTEMPORARY ART FOUNDATION  
Executive Officer CARSON BRICE, BOARD PRESIDENT  
Mailing Address P.O. Box 19609  
City RALEIGH State NC Zip Code 27619  
Telephone (919) 836-0088

Corporation \_\_\_\_\_  
Partnership \_\_\_\_\_  
Individual \_\_\_\_\_  
Government Unit \_\_\_\_\_  
Other \_\_\_\_\_  
(specify) \_\_\_\_\_

IV. CURRENT SITE USE:

Check the item or items which describe the current use of the site.

Residential	_____	Forest Land	_____	Retirement Home	_____
Business	_____	Farm Land	_____	Other	<u>X</u>
Industrial	_____	School/Day Care	_____	(specify)	<u>MUSEUM</u>
Pasture Land	_____	Hospital	_____		_____

V. ON-SITE RESIDENTS:

Are there any on-site residents? \_\_\_\_ Yes X No  
 Number of children ( 6 years old) living on site \_\_\_\_\_ Number of adults \_\_\_\_\_

VI. SURROUNDING PROPERTY USE:

Check the appropriate description of the area surrounding the site. (*More than one may apply.*)

Residential	<u>X</u>	Forest Land	_____	Retirement Home	_____
Business	<u>X</u>	Farm Land	_____	Other	_____
Industrial	<u>X</u>	School/Day Care	_____	(Specify)	_____
Pasture Land	_____	Hospital	_____		_____

VII. Site Operations (*More than one may apply.*):

	Current	Previous
1. Mining .....	_____	_____
2. Paper and wood production .....	_____	_____
3. Textiles .....	_____	_____
4. Fertilizer .....	_____	_____
5. Printing/painting .....	_____	_____
6. Leather tanning .....	_____	_____
7. Iron/steel foundry .....	_____	_____
8. Chemical, general .....	_____	_____
9. Plating/polishing ..... (1963-1969) .....	_____	<u>X</u>
10. Military/ammunition .....	_____	_____
11. Firing range .....	_____	_____
12. Rubber/plastics .....	_____	_____
13. Utility companies/transformers .....	_____	_____
14. Sanitary/refuse .....	_____	_____
15. Photo finishing .....	_____	_____
16. Lab/hospital .....	_____	_____
17. Wood treating .....	_____	_____
18. Battery reclamation .....	_____	_____
19. Pesticides formulation, packaging and/or distribution .....	_____	_____
20. Herbicide formulation, packaging and/or distribution .....	_____	_____
21. Other agrichemical formulation, packaging and/or distribution .....	_____	_____
22. Dry cleaning .....	_____	_____
23. Petrochemical processing or refining .....	_____	_____
24. Furniture manufacturing or finishing .....	_____	_____
25. Drum reconditioning .....	_____	_____
26. Unknown .....	_____	_____
27. Other (specify) <u>PRODUCE SALES (1931-1965)</u> .....	_____	<u>X</u>
<u>FURNITURE SALES (1970-1980)</u>		
<u>PAINT SALES (1992-1996)</u>		

# VIII. ENVIRONMENTAL PERMITS:

List all previous and current environmental permits below.

Type of Permit (e.g. landfill, nondischarge, etc.)	Past (circle one)	Present	Permit Number	Date Issued	Issuing Agency
	Past	Present			
UNKNOWN	Past	Present			
	Past	Present			
	Past	Present			
	Past	Present			
	Past	Present			
	Past	Present			
	Past	Present			

# IX. KNOWN OR SUSPECTED RELEASES OF HAZARDOUS SUBSTANCES OR WASTE TO THE ENVIRONMENT:

List all on-site spills, disposals and other releases of hazardous substances or materials containing hazardous substances.

Material/ Chemical Released (Known and suspected)	Physical State of Material (Use codes below)	Approx. Volume Released	Date of Release	Suspected Contaminants (Use codes below)	Source of Release (e.g. tank, buried drums, landfill, product spill, etc.)	Known or Suspected Contamination			
						Ground water	Surface Water	Sediment	Soil
						<Enter "K" if Known and "S" if Suspected >			
PLATING METALS (K)	S/SL	UNKNOWN	UNKNOWN	M	UNKNOWN	K			S
UNKNOWN SOURCE	L			O		K			K
HEATING OIL (S)	L			PE		S			S

## Physical State Codes

G - Containerized Gas  
L - Liquid  
S - Solid/Powder  
Sl - Sludge

A - Acids  
Ab - Asbestos  
Am - Ammonia  
B - Bases  
C - Cyanide

## Codes for Suspected Contaminants

D - Dioxins  
M - Metals  
Mu - Mixed Municipal Waste  
O - Organic Chemicals

P - PCBs  
Pe - Petroleum Products  
Ps - Pesticides  
W - Waste Oil

X. TOTAL AREA OF ALL DISPOSALS, SPILLS, OR RELEASES OF HAZARDOUS SUBSTANCES OR WASTE:

- ☐ less than 1 acre  
☐ 1 acre or more, but less than 5 acres  
☐ 5 acres or more, but less than 10 acres  
☐ 10 acres or more  
☒ Unknown

XI. AVAILABILITY OF ENVIRONMENTAL ANALYTICAL DATA:

Do any environmental reports or laboratory analytical data exist for the site? ☒ Yes ☐ No  
If yes, attach reports or data to this form.

XII. IDENTIFY WHETHER ANY OF THE FOLLOWING ARE PRESENT OR WERE PRESENT IN THE PAST AT THE SITE (*More than one may apply.*):

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Debris pile(s)                 | <input type="checkbox"/> Tank(s) above ground           | <input type="checkbox"/> Spill(s)             |
| <input type="checkbox"/> Land treatment of sludges      | <input type="checkbox"/> Septic tank(s)                 | <input type="checkbox"/> Wastewater lagoon(s) |
| <input type="checkbox"/> Landfill(s) or buried waste    | <input type="checkbox"/> Surface impoundment(s)         | <input type="checkbox"/> Drum(s)              |
| <input checked="" type="checkbox"/> Tank(s) underground | <input type="checkbox"/> Underground injection of waste |   |
| <input type="checkbox"/> Other ( <i>specify</i> ) _____ |   |   |

XIII. ACCESSIBILITY OF SITE (*More than one may apply.*):

- ☐ 24-hour security guard  
☐ Security guard < 24-hour/day  
☒ Physical barrier (steep bank, creek, walls, etc.)  
Describe physical barriers SITE IS LOCATED IN SUBGRADE SOILS BENEATH BASEMENT SLAB
- ☐ Site completely surrounded by fence  
☐ Site partially surrounded by fence  
☐ Locked gate  
☐ Unlocked gate  
☐ No control of access to site  
☒ Other (*specify*) LOCKED DOORS W/ SECURITY SYSTEM/ALARMS

XIV. WATER SUPPLY SOURCES:

Identify whether the following are present on site or on adjacent property.

	Present on site		Present on Adjacent Property	
	Yes	No	Yes	No
Spring	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Well	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Surface Water Intake	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

XV. SITE SURFACE WATER:

Indicate whether any surface water bodies (e.g. streams and lakes) exist on the site or the property adjacent to the site.

NO SURFACE WATER BODIES EXIST ON THE SITE OR THE PROPERTY ADJACENT TO THE SITE.



XVI. CERTIFICATION AND SIGNATURE:

I certify that to the best of my knowledge and belief, the information supplied on this form is complete and accurate.

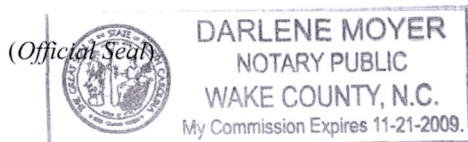
Signature [Signature] Date JANUARY 26 2009  
Name and Title (Type or print) MARK BROWN LG, PG, RSM  
Mailing Address ECS CAROLINAS LLP  
9001 GLENWOOD AVE, RALEIGH NC 27617

North Carolina STATE

Wake COUNTY

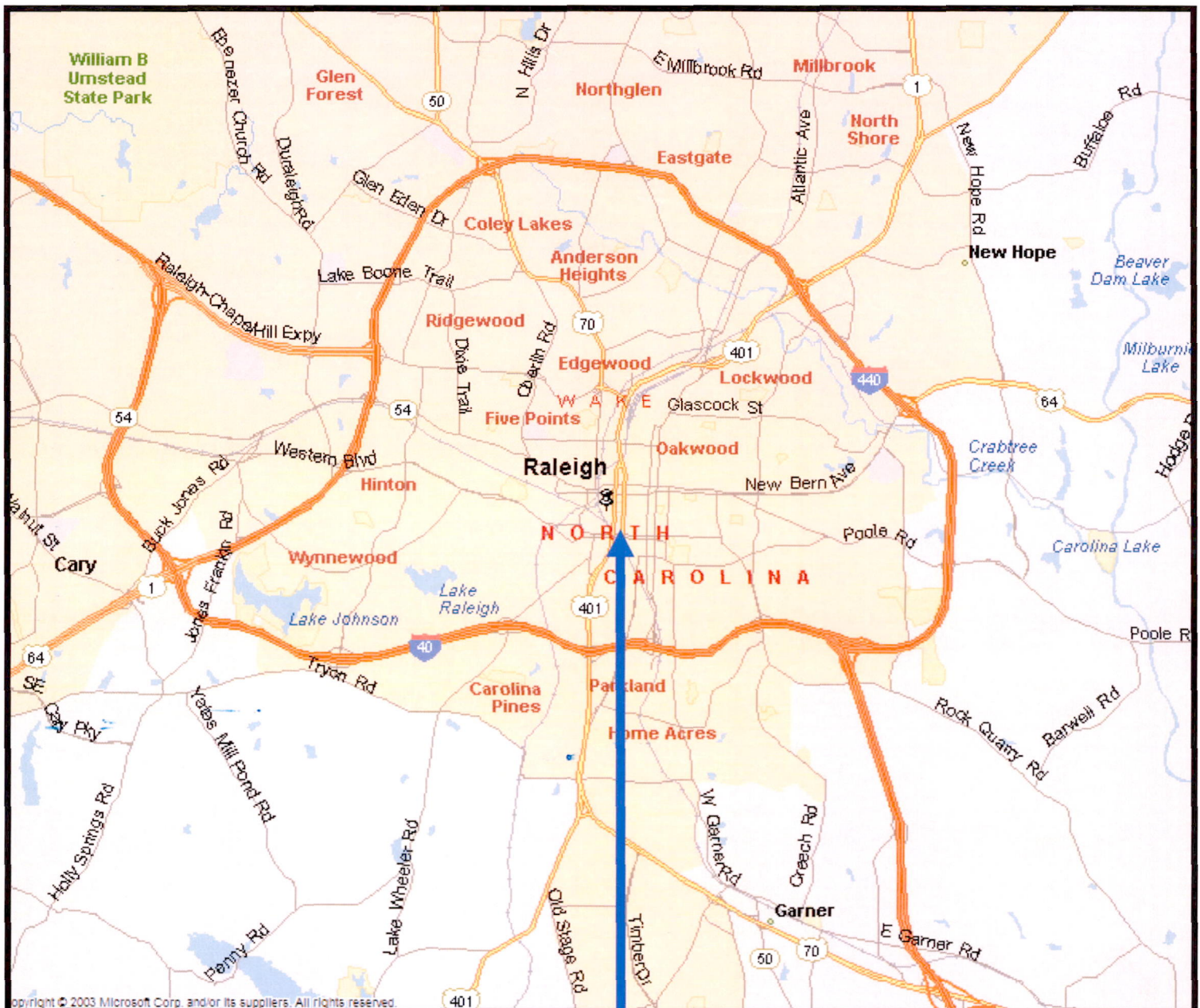
I, Darlene Moyer, a Notary Public for said County and State, do hereby certify that Mark Brown personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal, this the 26 day of January, 2009.





[Signature]  
Notary Public

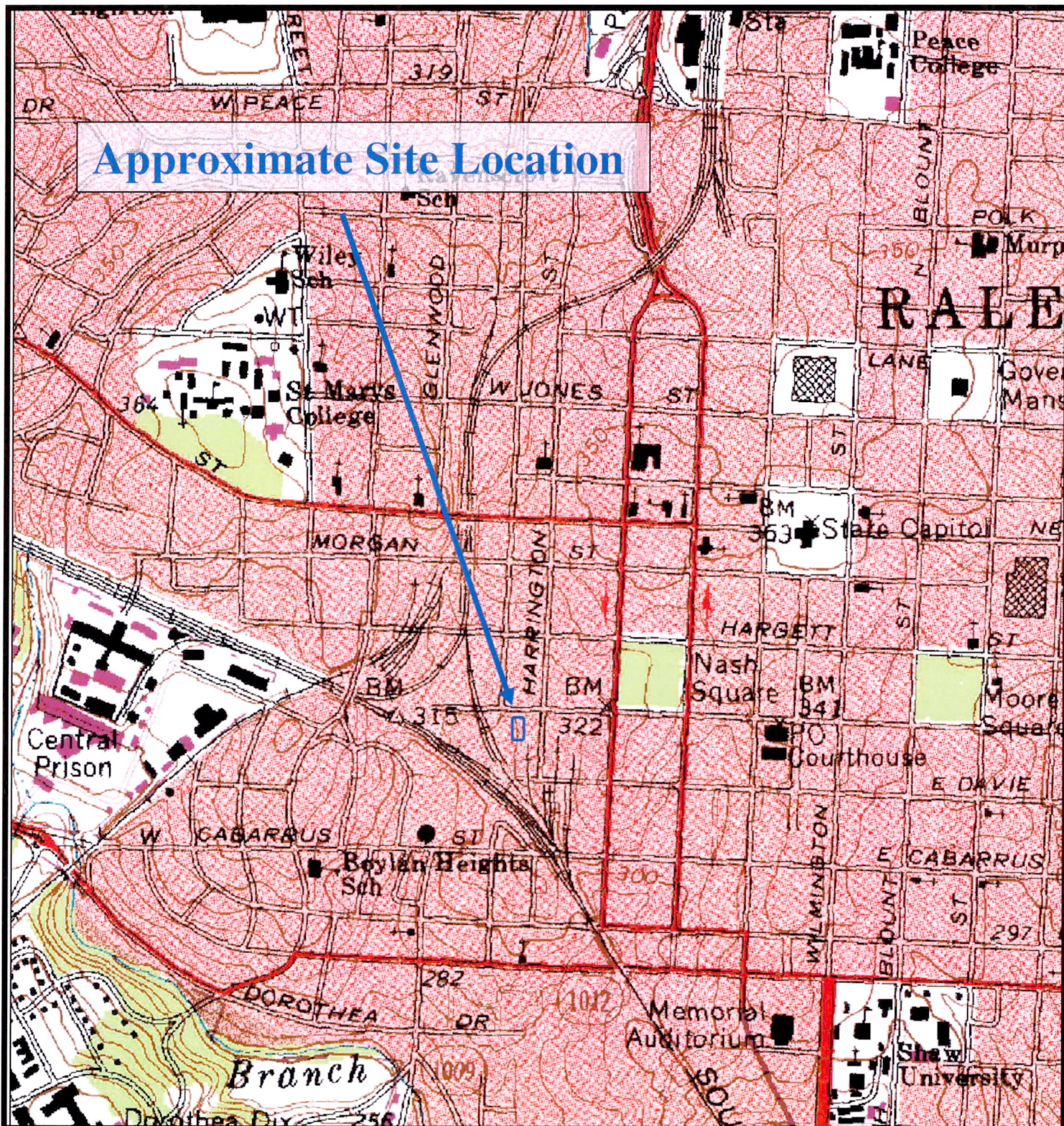
My commission expires November 21, 2009.



## Approximate Site Location

	 Not to Scale	Vicinity Map 2004 Microsoft Map Point	Figure No. 1
		Soil Delineation Contemporary Art Museum 409 West Martin Street Raleigh, Wake County, North Carolina	ECS Project # 14939-c





## Approximate Site Location



Approx. Scale:  
1:12,000

Topographic Map  
USGS 7.5-Minute Series Raleigh West,  
North Carolina Quadrangle, 1988

Soil Delineation  
Contemporary Art Museum  
409 West Martin Road  
Raleigh, Wake County, North Carolina

Figure No.  
2

ECS Project #  
14939-c



# Approximate Site Location



Site Location Map  
2005 Aerial Photo  
Wake County Online GIS

Figure No.  
3



Not to Scale

Soil Delineation  
Contemporary Art Museum  
409 West Martin Street  
Raleigh, Wake County, North Carolina

ECS Project #  
14939-c